

The filing fee is calculated as follows:

			SMALL ENTITY			LARGE ENTITY	
CLAIMS	NO. FILED	NO. EXTRA	BASIC FEE: \$370			BASIC FEE: \$740	
Total	8 - 20 =	- 0 -	X9	\$	OR	X18	\$
Independent	1 - 3 =	- 0 -	X42	\$	OR	X84	\$
[] Multiple Dependent Claims Present			\$140	\$	OR	\$280	\$
			TOTAL	\$	OR	TOTAL	\$740.00

[] **The Commissioner is not authorized to charge the filing fee at this time as we elect to defer payment of the entire filing fee until receipt of a Notice to File Missing Parts.**

[X] A check in the amount of **\$740.00** to cover the filing fee is enclosed.

[X] The Commissioner is hereby authorized to charge and/or credit **Deposit Account No. 50-1017 (Billing No. 210407.0010)** as noted below. A duplicate copy of this sheet is enclosed.

[X] Any overpayments or deficiencies in the above-calculated fee.

[] Filing fee in the amount of \$_____ as calculated above.

[X] Any additional fees required under 37 C.F.R. § 1.16 and § 1.17.

[X] In the event that a Petition for Extension of Time is required during the prosecution of this application, but not submitted, please charge any extension fee under 37 C.F.R. § 1.136(a) to our Deposit Account noted above.

CORRESPONDENCE ADDRESS:

11/29/01
(Date)

By: Leslie L. Kasten, Jr.
LESLIE L. KASTEN, JR.
Registration No. 28,959
AKIN, GUMP, STRAUSS, HAUER & FELD, L.L.P.
One Commerce Square
2005 Market Street - Suite 2200
Philadelphia, PA 19103
Telephone: 215-965-1200
Direct Dial: 215-965-1290
Facsimile: 215-965-1210
E-Mail: lkasten@akingump.com

[X] Customer Number or Bar Code Label: **000570**

LLK:srn
Enclosures